

Lead Certification Exam (special testing arrangement)



| Agency Name: | | | | | | |
|---------------------------------------------------------------------|----------------------|------------------------|--------------|--------------------|-------------------|--|
| Agency Contact | | | | | | |
| Phone Number: | | | _ fax: _ | | | |
| Number of Candi | dates: | | | | | |
| Number of Books (\$175.00 each): | s Needed | Inspector/Assessor | Supervisor | Project Monitor | Project Designer | |
| Test Date: | | | | | | |
| Test Time(s*): | | | | | | |
| Test Location: | | | | | | |
| | | | | | | |
| | | | | | | |
| Fees Included (\$175 per book plus \$326.70 special testing fee)**: | | | | | | |
| Send Refund (if any) to: | | | | | | |
| | | | | | | |
| | business name | | | attn: | | |
| address | | | | | | |
| | city, state, zipcode | | | phone number | | |
| * Exams are thre | e hours each. Cand | lidates may take up to | two differen | t exams in one day | y. If a candidate | |

is taking more than one exam, you will need to schedule a morning AND an afternoon session.

Date Recd:

registered:

Amt Received: _____

CPS USE ONLY

tested:

Refund due: ____ Refund sent: ____

** Up to 20 candidates. Additional candidates require

additional arrangements – call CPS at

(916) 263-3644.